

ISSUE SLIP STAPLE AREA (for optional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	McSaul	13	04/25/01
O.I.P.E. CLASSIFIER		1145	04/25/01
FORMALITY REVIEW	Mar		
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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TC 1195